

ORDER FOR SUPPLIES OR SERVICES										Page 1 Of 4	
1. Contract/Purch Order/Agreement No. DAAE20-01-P-0314			2. Delivery Order/Call No.		3. Date Of Order/Call (YYYYMMDD) 2001MAY01		4. Requisition/Purch Request No. SEE SCHEDULE			5. Priority DOA5	
6. Issued By TACOM-ROCK ISLAND AMSTA-LC-CSC-A SHERI GROSS (309)782-4857 ROCK ISLAND IL 61299-7630 EMAIL: GROSSS@RIA.ARMY.MIL				Code W52H09	7. Administered By (If other than 6) DCMC ST LOUIS 1222 SPRUCE STREET ST LOUIS MO 63103-2812				Code S2605A	8. Delivery FOB <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other (See Schedule if other)	
9. Contractor Name and Address GREAT PLAINS MACHINING LLC 901 E 56 HIGHWAY OLATHE KS 66061-0000 TYPE BUSINESS: Other Small Business Performing in U.S.			Code 1S4N9	Facility	10. Deliver To FOB Point By (Date) (YYYYMMDD) SEE SCHEDULE			11. X If Business Is <input checked="" type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned			
					12. Discount Terms 3.00% 10 Days 2.50% 20 Days 1.50% 30 Days			13. Mail Invoices To the Address in Block See Block 15			
14. Ship To SEE SCHEDULE			Code	15. Payment Will Be Made By DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS PO BOX 182381 COLUMBUS OH 43218-2381			Code HQ0339	Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2			
16. Type of Order	Delivery/Call	This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.									
Purchase	X	Reference your <input type="checkbox"/> Oral; <input type="checkbox"/> Written Quotation DAAE2001T0137, Dated _____, furnish the following on terms specified herein.									
		Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same.									
Name Of Contractor			Signature			Typed Name And Title			Date Signed (YYYYMMDD)		
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:											
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE											
18. Item No.		19. Schedule Of Supplies/Service SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price			20. Quantity Ordered/Accepted*		21. Unit	22. Unit Price		23. Amount	
		KIND OF CONTRACT: Supply Contracts and Priced Orders									
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					24. United States Of America By: KRISTAN A MENDOZA /SIGNED/ MENDOZAK@RIA.ARMY.MIL (309)782-0243					25. Total \$3,090.75	
26. Quantity In Column 20 Has Been <input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted Date _____ Signature Of Authorized Govt Representative _____					27. Ship. No.		28. D.O. Voucher No.		30. Initials		
36. I certify this account is correct and proper for payment Date _____ Signature And Title Of Certifying Officer _____					29. Differences		32. Paid By		33. Amount Verified Correct For		
					31. Payment <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final				34. Check Number		
									35. Bill Of Lading No.		
37. Received At		38. Received By		39. Date Received		40. Total Containers		41. S/R Account Number		42. S/R Voucher No.	

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	SUPPLIES OR SERVICES AND PRICES/COSTS				
	<u>Supplies or Services and Prices/Costs</u>				
0001AA	<u>PRODUCTION QUANTITY</u>	317	EA	\$ 9.75000	\$ 3,090.75
	NSN: 5315-01-252-2981 NOUN: PIN,GROOVED,HEADLES FSCM: 19200 PART NR: 12597104 SECURITY CLASS: Unclassified PRON: M111S101M1 PRON AMD: 02 ACRN: AA AMS CD: 070011 <u>Packaging and Marking</u> <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin <u>Deliveries or Performance</u> DOC SUPPL <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u> 001 W52H091004A150 W25G1U J 1 <u>DEL REL CD QUANTITY DEL DATE</u> 001 117 04-SEP-2001 FOB POINT: Destination SHIP TO: <u>FREIGHT ADDRESS</u> (W25G1U) XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001 <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-01-P-0314/0000 DOC SUPPL <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u> 002 W52H091004A151 W62G2T J 1 <u>DEL REL CD QUANTITY DEL DATE</u> 001 200 04-SEP-2001 FOB POINT: Destination SHIP TO: <u>FREIGHT ADDRESS</u> (W62G2T) XU DEF DIST DEPOT SAN JOAQUIN 25600 S CHRISMAN ROAD REC WHSE 10 TRACY CA 95376-5000 <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-01-P-0314/0000				
0002	<u>Supplies or Services and Prices/Costs</u>				
	<u>DATA ITEM</u>		EA	\$ ** NSP **	\$ ** NSP **

Name of Offeror or Contractor: GREAT PLAINS MACHINING LLC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<p>NOUN: DD FORM 1423</p> <p>SECURITY CLASS: Unclassified</p> <p>Contractor will prepare and deliver the technical data in accordance with the requirements, quantities and schedules set forth in the Contract Data Requirements Lists (DD Form 1423), Exhibit A.</p> <p>A DD 250 IS NOT REQUIRED.</p> <p>(End of narrative B001)</p> <p><u>Inspection and Acceptance</u></p> <p>INSPECTION: DestinationACCEPTANCE: Destination</p>				

CONTINUATION SHEET**Reference No. of Document Being Continued**

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PIIN/SIIN DAAE20-01-P-0314

MOD/AMD

Name of Offeror or Contractor: GREAT PLAINS MACHINING LLC

CONTRACT ADMINISTRATION DATA

LINE	PRON/	OBLG							JOB			
ITEM	AMS CD	ACRN	STAT	ACCOUNTING CLASSIFICATION				ORDER	ACCOUNTING	OBLIGATED		
								NUMBER	STATION			AMOUNT
0001AA	M111S101M1	AA	2	97	X4930AC6G	6D	26FB	S11116	W52H09	\$		3,090.75
	070011											
									TOTAL	\$		3,090.75

SERVICE						ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>	<u>AMOUNT</u>
Army	AA	97	X4930AC6G	6D	26FB S11116	W52H09	\$ 3,090.75
						TOTAL	\$ 3,090.75